Recent figures obtained by the American Social Hygiene Association show that one in twenty people, taking the population as a whole, is infected with syphilis. The venereal diseases still far outnumber all other serious infectious diseases. The incidence of syphilis is 50 per cent greater than that of tuberculosis. Syphilis cases are thirteen times more numerous than diphtheria. Syphilis still attacks twenty-eight times as many as infantile paralysis.

In the light of these figures you may ask "What did the American Social Hygiene Association do during the past year to check the spread of syphilis and gonorrhea?"

The attached folder tells the story. "How Social Hygiene Reached Out to Millions in 1939" spotlights the activities and accomplishments of the association in the fight against syphilis during 1939.

I am taking this opportunity to suggest that you carry an account of the 1939 Social Hygiene activities in the next issue of the California and Western Medicine.

Sincerely,

RAY LYMAN WILBUR, M. D., President.

Now, More Than Ever, the Health of the People of the United States Has Great Significance

Great though the gains against syphilis and gonorrhea have been during the past two years, the need not only for sustained but greater activity becomes more apparent. Now more than ever, the health of the people of the United States has great significance. Now more than ever, our people must be taught to "Guard Against Syphilis."

The American Social Hygiene Association and its National Anti-Syphilis Committee invoke your support of the "8-Point Program on 48 Fronts":

- 1. Tell the great masses of the people the truth about syphilis and gonorrhea—how these dangerous diseases may be avoided, how cured. Youth, the chief victim, needs more help, swiftly and directly.
- 2. Rally more citizens to fight syphilis and gonorrhea through group and community action. Strong voluntary organizations are needed in more than a thousand cities and towns.
- 3. Encourage good laws and emphasize their observance to protect the community and the family from venereal diseases and conditions favoring their spread. Although thirty states had, by June 1, 1939, outlawed syphilis in marriage and fourteen had provided serological testing of pregnant women to prevent congenital syphilis, a number of these laws need revision; and there are still many states which have no such protective measures at all.
- 4. Attack commercialized prostitution and quackery—two arch-accomplices of syphilis and gonorrhea.
- 5. Aid employers and employees to strike at syphilis and gonorrhea—roots of inefficiency and economic loss.
 6. Answer thousands of questions asked in letters and
- 6. Answer thousands of questions asked in letters and interviews by victims of syphilis and gonorrhea in need of sympathetic and sound advice and assist them to find reliable aid.
- 7. Help parents, teachers and church leaders to provide sex education for children and youth and to offer practical preparation for marriage and parenthood.
- 8. Continue observations and informational service regarding official activities against syphilis and gonorrhea, weighing programs and costs with results achieved.

Syphilis and gonorrhea still are the most prevalent of the dangerous infectious diseases, far outnumbering the cases of tuberculosis, infantile paralysis, diphtheria, scarlet fever, smallpox, typhoid fever. Syphilis brings more deaths than traffic; its toll of misery and broken homes is huge; its cost to public and private purse is staggering. Seeking your support for this "8-point program" in every

Seeking your support for this "8-point program" in every state of the Union, the National Anti-Syphilis Committee draws your attention to the observation from Surgeon General Parran of the United States Public Health Service: "It is necessary to point out . . . that the money appropriated by federal, state and local governments plus the funds made available by various philanthropic and other agencies, does not yet approximate the estimates considered by medical and public health experts to be necessary for the most effective public health campaign against syphilis and gonorrhea."

The Surgeon General also stated in a coast to reach

The Surgeon General also stated in a coast-to-coast broadcast: "Action by governments is not sufficient to deal with problems such as this which affects the whole people. Increasingly there is needed a strong national voluntary

agency through which citizen interest can make itself felt. We are fortunate in having such an agency in the American Social Hygiene Association and its National Anti-Syphilis Committee."

A fund of \$500,000 is being completed for the "8-point program." Checks, inquiries, requests for literature, films, exhibits, should be addressed to American Social Hygiene Association, 50 West 50th Street, New York.

Subject: On use of title "Doctor," or its abbreviations.

STATE OF CALIFORNIA

DEPARTMENT OF

PROFESSIONAL AND VOCATIONAL STANDARDS
BOARD OF MEDICAL EXAMINERS

Sacramento, March 9, 1940.

To the Editor:—We thought perhaps readers of CALIFORNIA AND WESTERN MEDICINE might be interested in the enclosed copy of Attorney General's Opinion NS-2379, dated February 29, 1940.

Very truly yours,

C. B. PINKHAM, M. D., Secretary-Treasurer.

1020 N Street, Room 536.

(COPY)

STATE OF CALIFORNIA LEGAL DEPARTMENT

San Francisco, February 29, 1940.

Charles B. Pinkham, M. D., Secretary-Treasurer, Board of Medical Examiners, 1020 N Street, Sacramento, California.

Dear Sir:

In your communication of February 20, 1940, you refer to Section 2409 of the Business and Professions Code, which reads as follows:

Unless a person licensed and authorized under this chapter or any preceding medical practice act to use the title "Doctor" or the letters or prefix "Dr.," holds a physician's and surgeon's certificate, the use of this title or these letters or prefix without further indicating the type of certificate he holds, constitutes unprofessional conduct within the meaning of this chapter.

You ask:

- 1. Whether the term "indicating the type of certificate he holds" means that a drugless practitioner who uses the prefix, "Dr.." must follow his name with the term "drugless practitioner"; and
- 2. Whether a licensed chiropodist who uses the prefix "Dr." must follow his name with the word "chiropodist."

In reply, please be advised that both of your questions are answered in the affirmative. These certificates issued to drugless practitioners and to chiropodists are defined in subdivisions (b) and (c) of Section 2135 of the Business and Professions Code as drugless practitioners' certificates and certificates to practice chiropody respectively, and if either character of licentiate uses the expression "doctor" or the prefix "Dr.," he is required to further indicate the type of certificate held by him.

Very truly yours,

EARL WARREN, Attorney General. By Lionel Browne, Deputy.

Subject: Some Verse?

Compton, March 2, 1940.

To the Editor:—I am in general critical of the attempts at humor that are characteristic of medical journals and am making no suggestions. Nevertheless, I think the fol-

lowing should see something of the light of day, if no more than through reading by yourself and June Harris, to whom I am sending a copy.

One of our medical staff, affectionately called "Dan'l Boone," has just been operated on for rectal fistula and abscess. G. Creswell Burns, M. D., of our medical staff, wrote him as follows:

(COPY)

Dear Dan:

I wouldn't know what kind of flowers to buy for you, so yesterday I acted on an inspiration and the following is the result. I had a little struggle with the words but finally whipped them into shape. If you don't like this, I'll send you some flowers!

THE BATTLE OF THE WEEK

"Fall in!" the Captain of the Blood Stream cried.
"Be quick! The bugs are ready for the blast;
They took him by surprise, the rats—they tried
To catch him unawares—'Come men, work fast.'"

"Where to?" the Sergeant of the Leucos yipped.
"The caudal front," the Captain blurped, and then
He muttered low, "Or is it rear?—Oh, skip it—
Perineum Highway Number 10."

So, millions of them rallied through the day. No need for firm persuasion—"He's all right! For Daniel's sake!" they sang and sailed away. "Stamp out the germ invasion! Phagocyte!"

The fight was on, but Dan was not so sure Which side was friendly to him—which was foe. He wanted pretty much to find a cure, For he was feeling like a so and so.

They struggled on. Great guns! And what a fuss! Dan writhed and shouted, "Cut it out, you fools!" He couldn't stand the germs, but then the pus Was just as bad. "Help! Someone get the tools!"

So, cut it out they did and was Dan glad!
"He doesn't seem to like our help," the Leucos cried.
"Why, yes I do," Dan said so glum and sad,
"But listen, fellows, go away!" he sighed.

So all is calm now on the caudal front. Dan rests in peace, all pain is gone at last. The Army is retreating and the stunt Put on for Dan's sweet benefit is past.

G. C. B.

Regards and best wishes,

Cordially,

Leucocytically yours,

GLENN MYERS, M. D.

Subject: Premarital Wassermann Work.

(COPY)

STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC HEALTH
SACRAMENTO

San Francisco, March 15, 1940.

George H. Kress, M. D., California Medical Association, 450 Sutter Street, San Francisco, California. Dear Doctor Kress:

I am returning the copies of papers and letters from Mr. M. Anderson Thomas, attorney at law, in reference to premarital Wassermann work.

I find that the private laboratories are now doing about 62 per cent of the tests, while the public health laboratories are doing the remainder.

Provision is made on the back of the blanks sent out for the physician to state whether the patient is indigent or not. Same is signed by the doctor, so we presume those we receive come from people who cannot afford to pay for Wassermann tests.

I have talked the matter over with Mr. Thomas and explained to him that this Department has no particular desire to do premarital Wassermanns. However, we feel it is our duty to take care of those referred to us by physicians for patients who have not the money to pay a private laboratory.

Cordially yours,

W. M. DICKIE, M. D., Director of Public Health.

313 State Building.

MEDICAL JURISPRUDENCE[†]

By Hartley F. Peart, Esq. San Francisco

Autopsies: Authorization by Next of Kin

The following questions sometimes arise in a physician's practice and in the management of hospitals:

- 1. Have the next of kin of a deceased person the authority to order or authorize an autopsy to be performed upon the body?
- 2. When difficulty is encountered in contacting the true next of kin, may such authorization be made by the next of kin within the state or vicinity?
 - 3. Must consent always be obtained?

Although, in the United States of America, private autopsies are commonly performed at the instance of the next of kin, the writer has found no California law expressly granting to any private citizen the right to order an autopsy. In fact, taking the statutes upon their face, the law appears to give the coroner exclusive power to order autopsies, dissections, etc. To find legal provision for private authorization of autopsies, one must resort to the common law.

In England, the cradle of the modern common law, there was in legal contemplation, no ownership by anyone of the body of a deceased person. All matters pertaining to the burial of the dead from a very early date were handled by the ecclesiastical courts as distinguished from the common law courts, and, therefore, the only possible property right in the remains of a deceased person was that of the church. The repudiation of ecclesiastical law and courts by the American colonies left the temporal courts the sole protector of the dead and their living next of kin. The temporal courts of this country developed the logical rule that the right to the custody and burial of the remains of a deceased person is vested in the next of kin, and it is from this rule that authority to order private autopsies must be inferred, if such authority is to be found. Also, as the next of kin are the only ones entitled to the possession of the body, they are the only ones who can complain of an injury to the same and, therefore, it has been a general practice to proceed with the autopsy when all possible complaint from this source has been removed.

In California the statutes bearing upon the subject are as follows:

Section 7100 of the Health and Safety Code provides that unless other directions have been given by the de-

[†] Editor's Note.—This department of California and Western Medicine, presenting copy submitted by Hartley F. Peart, Esq., will contain excerpts from the syllabi of recent decisions, and analyses of legal points and procedures of interest to the profession.